



Testimony on House Bill 5211 An Act Concerning Certificates of Need Public Health Committee February 24, 2016

Senator Gerratana, Representative Ritter and members of the Public Health Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS) and the Connecticut Chapter of the American College of Surgeons (CTACS), thank you for the opportunity to present this testimony to you today on **House Bill 5211 An Act Concerning Certificates of Need**. House Bill 5211 would add to the list of requirements for a Certificate of Need the reduction of specialty services by 50% or greater. Specialty services are defined as inpatient or outpatient obstretric and maternity, pediatric, emergency or critical care services. Not only does this language raise questions, but provides us an opportunity to discuss issue with the entire CON process.

In a day and age when even the Federal Trade Commission (FTC) has expressed its concern with the anticompetitive nature of the CON process it is simply impossible for CSMS to do anything but continue to oppose the CON for any and all reasons, and for all services, including the acquisition of imaging equipment, and especially for the delivery of office based procedures. The CON stifles competition, hinders the natural progression of healthcare services, and has been a significant factor in our inability to recruit and retain physicians. We believe the CON should be eliminated in entirety.

That said, we question the impact this legislation will have on services provided by our hospitals and outpatient facilities. Obviously, facilities in need of reducing staff hours by more than 50% have made the difficult decision that providing those services is not sustainable. That is a decision not easily made, understanding the impact on the community and on those employees who will lose jobs. We have always questioned the subjectivity of the CON process and we are challenged to understand how anyone outside of the institution making the difficult decision to cut back can be more informed or better positioned to judge the necessity of it. In those situations in which the Department of Public Health determines that a facility cannot reduce staff hours, on what basis will those determinations be made? If it is determined that such a reduction cannot be made, what concessions will be made to ensure there is no impact on the facilities ability to provide services in other areas?

The language of the bill lacks sufficient detail including the time scale for the reduction of services or a methodology for determining the extent of reductions and hence carries the potential for capricious and arbitrary determinations. Health care facilities that are forced to maintain overstaffed and non-productive services will experience a loss of enthusiasm and dedication that is detrimental to good care.

CSMS and CTACS opposes this legislation for all of the above problems but primarily and emphatically because CON's in every shape and form are counter productive to the delivery of high quality health care.

Based on our overall opposition to the CON process and the questions that exist we oppose HB 5211.

The following organizations support the above testimony -

The Connecticut Society of Eye Physicians

The Connecticut Dermatology & Dermatologic Surgery Society

The Connecticut Urology Society

The ENT Society